



Ktunaxa Kinbasket Child and Family Services Level 13 Aboriginal Practice Standards

Level 13 Practice Standard 1: Elements of the Comprehensive Plan of Care

A comprehensive plan of care is developed for the child.

KKCFS Criteria:

The plan of care for a child must reflect the practices of the child's nation (i.e. Ktunaxa or Kinbasket) including culture and traditions. This must be addressed in all areas of the plan of care (i.e. placement, education, etc), not just seen as the identity section of the plan of care.

If unclear regarding culture and tradition when developing a plan of care, consideration must be given to accessing the Elders' Advisory Committee to provide cultural and traditional guidance.

The social worker ensures that an interim plan of care is completed within 30 days of the child coming into care.

The social worker ensures that a complete plan of care is completed within 60 days of the child coming into care.

The social worker uses the Looking After Children (MCFD) Assessment and Planning Tools in completion of the plan of care. The social worker must also utilize the KKCFS Appendix to this tool to ensure plan of care is sensitive to the cultural needs of the child.

KKCFS Process:

In completing the plan of care there are three key steps:

- Assessment;
- Plan Development; and
- Documentation.

The plan of care assessment is based on the current functioning of the child, the needs of the child, and the services required to meet these needs. The needs are to be addressed in the following areas:

- Development (physical and emotional);
- Behavioural;
- Educational;
- Health/medical/dental;
- Cultural identity;

- Family and social relationships;
- Recreational;
- Self-care skills; and
- Religious/spiritual.

Refer to Level 13 Practice Standard 3 - Developing the Comprehensive Plan of Care for how the plan of care process is to be completed. Input from the child is critical during this process.

When developing and documenting the plan of care, the social worker ensures that the plan of care also includes:

- Biographical information;
- Recent Photograph of the child;
- Long term goal for the child;
- Health and medical history including goals and needs;
- Current placement information;
- Provision for access to family and friends, which address areas of risk; and
- Provisions for the child to develop or maintain an understanding of the history, language, and traditional practices of the child's Nation, the difference between concepts in the Nation's language and the closest English translation, and the impact of colonization and racism.

Documentation:

- ~~Interim~~ Plan of Care (~~MCFD Document~~ ~~KKCFS - 221~~)
- Plan of Care ~~KKCFS Appendix~~ (KKCFS - ~~223~~ ~~221~~)

Level 13 Practice Standard 2: Setting a Long Term Goal for the Child

A long-term goal for the child is identified in the opening recording of the comprehensive plan of care for the child.

KKCFS Criteria:

The goal for all ~~(took out word Nation)~~ children is to be raised safely in the parent(s)' care, and if not possible in the care of a family member.

This must be a plan that is in the child's best interest and in the child's well being. Where this is not possible KKCFS requires a child to be raised in a permanent setting that meets the child's care needs including culture.

The social worker ensures that the long-term goal for the child is congruent with the MCFD (definition) risk reduction service plan developed for the family, the child's plan of care, and the legal status of the child.

The placement planning process must address section 71 of the *Child, Family and Community Service Act*.

The social worker will ensure that the long-term goal for the child is consistent with one of the following categories:

- Return to child's parent(s);
- Placement of the child with extended family;
- Placement within the child's First Nation community;
- Independent living arrangements in preparation for adulthood; or
- An adoption or family relations act order.

In setting the long-term goal there must also be emphasis placed on developing the long-term educational goal with and for the child.

In developing long-term goals the child must be as an active participant as possible. The child's age and level of understanding must be taken into consideration when determining the child's level of participation.

To support the social worker in developing the long-term goals, the social worker must consider the following:

- Elders;
- Community members; and
- MCFD assessment and planning tools, etc.

Documentation:

- Plan of Care (MCFD Document)
- Plan of Care KKCFS Appendix (KKCFS - ~~223221~~)

Level 13 Practice Standard 3: Development of the Comprehensive Plan of Care

The process for the development of the plan of care will ensure that:

- Participants share responsibility in the decision making process;
- There is a focus on the decisions to meet the needs and capabilities of the child; and
- The plan addresses issues of safety and risk.

KKCFSS Criteria:

The plan of care meeting will take into account the child's (ie Ktunaxa/Kinbasket) culture and will be conducted in a way sensitive to these cultures. Respect for communication processes and styles must be given.

KKCFSS Process:

(1) Determining who should participate in the plan of care:

(below section moved up from later in this standard)

In determining who should participate, the social worker considers involving the following people:

- The child (level of input is dependent on age);
- The child's family as identified by the child regardless of legal or blood relationships, unless those people cannot be located, or it is determined that it would not be in the child's best interest to include such people;
- The child's community, as identified by the child, the family, and any First Nation community which considers the child to be one of its members;
- Any person who has an important relationship with the child, as identified by the child; and
- Any people currently providing support or services to the child and/or the child's family, including the caregiver of the child.

(2) Cultural Sensitivity:

The plan of care process must take into account the child's culture and be conducted in a way that is sensitive to the child's culture. In order to understand the child's culture the social worker must take into account the cultural practices of the child's family/home. Wherever possible the placement planning for a child should be in an environment that supports/matches the cultural practices of the child's family/home where the child lived prior to entering care.

The social worker is responsible for collecting all of the child's belongings with identification in the plan of care as to cultural practices applicable to that child and their community

- Teeth and hair become the responsibility of a member of the community or a family member. Other examples include eagle feathers, the umbilical cord and the child's first haircut.
- Training should be provided to foster parents in regard to cultural practices so an understanding is developed in regard to the significance of the items listed above.

(3) Plan of Care Meeting Process:

The social worker will meet with the child privately to gather the child's views regarding his/her plan of care moved from another section. The social worker will keep in mind the child's safety, best interest, and views throughout this process.

- The social worker will meet with family members, caregivers, service providers, and key community representative(s) as part of the plan of care assessment.
- The social worker will convene at least one meeting with all key individuals in the child's life, and wherever possible the child, to finalize the plan of care.
- If there are concerns regarding the safety and well being of the child or protection concerns, the social worker will limit the participation of those putting the child at risk in the group meeting.
- If one or more participants were not included in the plan of care process or group meeting the social worker will document why.
- The social worker must use the views stated by the child, family, caregivers and community as a guide for developing the plan, taking into consideration the child's best interest.
- The social worker ensures that the participants acknowledge the child's right to privacy
- The social worker must ensure a review date is established. In the meetings the social worker:
 - Ensures participants share responsibility in the decision making process;
 - Focuses the decisions on meeting the needs and capabilities of the child;
 - Addresses issues of safety and risk.

(4) Documentation of Plan of Care Meeting Process:

The social worker that the meeting produces a written, comprehensive, plan of care for the child, which is based upon both the information shared by all the participants, and decisions at the meeting(s). This includes:

- An assessment of the child's need;
- A summary of the information presented;
- A description of the services to be provided;

- A statement of the reasons why the services are to be provided and a description of the evaluation of each service;
- The names of the people in charge of completing specific tasks and the time frames for completing them;
- The reason why any people were excluded in the development of the plan; and
- The date and place of review.

(5) Approval of the Plan of Care:

The social worker obtains the Agency's delegated supervisor's approval of the plan.

(6) Distribution of the Plan of Care:

The social worker distributes the plan of care to the child and caregiver. Where appropriate, the social worker distributes the plan of care in full or in part to other members of the service delivery team, focussing on the best interest of the child and the child's right to privacy. Refer to Operational Standard 4 - Level 12 - Client Confidentiality and Information Sharing.

KKCFS Documentation:

- Plan of Care (MCFD Document ~~KKCFS-223~~)
- Plan of Care KKCFS Appendix (KKCFS 221)

Level 13 Practice Standard 4: Supervisory Approval

The supervisor needs to approve key management decisions, including but not limited to:

- **Finalizing and revising the comprehensive plan of care;**
- **Following through with reportable circumstances;**
- **Varying or restricting the child's access to family or others with whom there is a significant relationship;**
- **Moving a child from one placement to another; and**
- **Transferring or closing a file.**

KKCFS Criteria:

Supervisory approval is required on key identified decisions. Wherever possible, key decisions flowing from delegation will be made through a consultative process with the KKCFS team. Where consensus is not reached the supervisor will have final responsibility for the decision.

KKCFS Process:

The social worker consults with the supervisor and obtains the supervisor's approval for key management decisions noted above in the standard ensuring that:

- There is a thorough review of the relevant facts and data;
- Approval is obtained before decisions are made, whenever possible; and
- Social work will inform those involved in plan of significant changes and decisions.

KKCFS Documentation:

Case Note (KKCFS - 001)

Recordings (KKCFS - 004 through 007)

Level 13 Practice Standard 5: Review of the Comprehensive Plan of Care

A formal process is in place to review and revise the comprehensive plan of care.

KKCFS Criteria:

As per Practice Standard 3 - Developing the Comprehensive Plan of Care

KKCFS Process:

The social worker will hold meetings to review and revise the comprehensive plan of care within 6 months of developing the initial plan and every 6 months there after while the child is in care. A review may be done more frequently depending on the child's circumstances and in the preparation of the child's discharge from care.

The plan of care review meetings include:

- A reassessment of the child's needs and capabilities;
- An evaluation of the effectiveness of the previous plan to meet the child's needs; and
- Changes as necessary, to meet the current needs of the child.

Documentation:

- Plan of Care ([MCFD Document KKCFS-223](#))
- [Plan of Care KKCFS Appendix \(KKCFS 221\)](#)

Level 13 Practice Standard 6: Building and Maintaining a Relationship with the Child Social Worker Visits

The social worker meets with the child in continuing care as indicated in the plan of care, with at least one visit on the day of placement, seven days after placement, 30 days after placement, and every 90 days thereafter.

This meeting is held in a manner, which allows for the child and the social worker to communicate freely.

KKCFS Criteria:

The relationship between the child and the social worker is the foundation to ensure the child's needs are met. Although social workers are not the child's caregiver the social worker must engage the child in a relationship. At times the social worker may need to clarify the difference between guardian and caregiver. The needs of a child may require a social worker to maintain a level of contact beyond the minimum required. The best interest of the child must guide the level of contact. The social worker must be available and be able to respond to the child's requests for contact.

At a minimum, the level of contact between the social worker and the child will be:

- On the day of placement;
- On the fourth day of placement (this visit can be performed by an alternate KKCFS employee in place of the social worker);
- On the seventh day of placement; and
- Every thirty days thereafter.

KKCFS Process:

The social worker's objectives in meeting with the child are:

- To build a relationship with the child;
- To develop trust between the child and the social worker;
- To allow the social worker an opportunity to observe and talk to the child;
- To seek the child's views on the plan of care, and on daily activities including the child's living situation;
- To determine if unidentified challenges exist with respect to the child's care;
- To ensure that the services provided are meeting the child's needs;
- To ensure that the child understands his or her rights as a child in care;
- To ensure that the child understands his or her plan of care and is willing to participate in it; and

- To ensure that there are identified people in the child's life to whom the child can go to for help when needed. Support systems establish continuity of relationships for the child so that the child does not feel isolated.

The social worker ensures all contact with the child is documented and that this documentation identifies:

- If this contact was private;
- If the rights of a child in care were discussed; and
- If a safety check was completed.

KKCFS Documentation:

- Case note (KKCFS - 001)
- Plan of Care (~~MCFD Document KKCFS - 223~~)
- Plan of Care KKCFS Appendix (KKCFS 221)

Level 13 Practice Standard 7: When a Child or Youth is Missing, Lost or Runaway

The social worker takes responsible action, as would be expected of a reasonable and prudent parent, to locate a missing, lost or runaway child or youth, and to safeguard the child or youth from harm or the threat of harm.

KKCFS Criteria:

Refer to Level 12 Practice Standard 29 - When a Child or Youth is Missing, Lost, or Runaway

KKCFS Process:

Refer to Level 12 Practice Standard 29

KKCFS Documentation:

Refer to Level 12 Practice Standard 29

Level 13 Practice Standard 8: Providing for the Child’s Health Care Needs

Within the context of the comprehensive plan of care, the child’s health care needs are met.

KKCFS Criteria:

Refer to Level 12 Practice Standard 35 - Providing for the Child’s Health Care Needs

KKCFS Process:

Refer to Level 12 Practice Standard 35

KKCFS Documentation:

Refer to Level 12 Practice Standard 35

Level 13 Practice Standard 9: Informing the Child About Behavioural Expectations and Consequences.

The Child in care is informed about:

- **The standard of behaviour expected by the caregiver; and**
- **The consequences of not meeting the caregiver's expectations.**

KKCFS Criteria:

Refer to Level 12 Practice Standard 30 - Informing the Child About Behavioral Expectations and Consequences

KKCFS Process:

Refer to Level 12 Practice Standard 30

KKCFS Documentation:

Refer to Level 12 Practice Standard 30

Level 13 Practice Standard 10: Deciding Where to Place a Child

When participating in decisions regarding where to place a child, consistent with the child's needs and best interests, priority is given to placing the child (in order or priority);

- **With the child's extended family;**
- **Within the child's aboriginal community; or**
- **With another aboriginal family, if the child's own family or community cannot assume the child's care.**

KKCFS Criteria:

Refer to Level 12 Practice Standard 31 - Deciding Where to Place a Child

KKCFS Process:

Refer to Level 12 Practice Standard 31

KKCFS Documentation:

Refer to Level 12 Practice Standard 31

Level 13 Practice Standard 11: Consent to Health Care

Health care is provided to children in care as required, and consent is given as per the Child, Family and Community Service Act and Infants Act.

KKCFS Criteria:

Wherever possible, Critical Health Decisions that impact a child in care must be made in consultation with the child, significant family members and key advisory people.

Ultimate authority for the decision rest with the *child*, KKCFS social worker and supervisor. It is acknowledged there may be differing of opinions between the child, family, and agency (Ktunaxa Kinbasket Child and Family Services).

Identification of significant and key members for decision making must be identified and be constant in the process of case planning.

In making critical health decisions, such decisions must be consistent with the Infant's Act.

KKCFS Process:

The social worker can provide consent to health care for a child including:

- Routine medical and dental care;
- Recommended routine health care treatment; and
- Low risk elective or emergency surgery (e.g. setting a bone, tonsillectomy).

Any unusual or extraordinary medical procedures or treatment including organ transplants, procedures affecting reproduction, experimental drugs, surgical procedures or do not resuscitate orders and any other extraordinary health decisions require the approval of the supervisor and the Deputy Director of Aboriginal Services.

When the social worker has responsibility for a child who is terminally ill or who suffers from a potentially life threatening medical condition, the social worker ensures that the situation is reported to the Director of Child and Family Services.

The Social worker cannot override the child's decision to accept or reject health care if the child has the right to consent to treatment under section 16 of the Infant's Act.

When a social worker has doubts about consenting, or concerns about the nature of the proposed health care, the social worker may:

- Seek clarification from health care provider;
- Seek a second medical opinion;

- Consults the supervisor;
- Consults with Aboriginal Services Child Protection Division; and
- Possibly consults with legal counsel per section 29 of the *Child, Family and Community Service Act*.

The MCFD standards book *Practice Guidelines for Child Protection and Guardianship Workers: Managing Critical Health Care Decisions Including Advance Health Care Directives* can be used as resource guides to assist with such planning.

KKCFS Documentation:

- Permanent Medical Record (KKCFS - 231)
- Case note (KKCFS - 001)

Level 13 Practice Standard 12: Arriving at the Decision to Move the Child from One Placement Setting to Another

In arriving at the decision to move the child from one placement setting to another, the social worker:

- **Consults the child and family;**
- **Ensures that the decision is based on the child's best interests and that it is taken within the consent of the child's comprehensive plan of care; and**
- **Considers the long-term implications of the decision, including the potential impact of the move on the child, whether the new placement will provide stability and the opportunity for attachments with the caregivers.**

KKCFS Criteria:

Refer to Level 12 Practice Standard 32 - Arriving at the Decision to Move the Child from One Placement Setting to Another.

KKCFS Process:

Refer to Level 12 Practice Standard 32

KKCFS Documentation:

Refer to Level 12 Practice Standard 32

Level 13 Practice Standard 13: Planning to Move the Child

Following the decision to bring a child into care or to move the child from one living environment to another, the social worker considers the child's best interests, needs and:

- **Plans how the child will be moved, consistent with the child's best interests and needs;**
- **Prepares the child to the fullest extent possible for the move to the new living environment;**
- **Develops a strategy to actively support the child by maximizing continuity in the child's life and by minimizing any potential psychological and emotional trauma; and**
- **Follows the requirements in Level 13, Standard 36 in regard to the social worker's contact with the child and the child's caregiver.**

KKCFS Criteria:

Refer to Level 12 Practice Standard 33 - Planning to Move the Child

KKCFS Process:

Refer to Level 12 Practice Standard 33

KKCFS Documentation:

Refer to Level 12 Practice Standard 33

Level 13 Practice Standard 14: Assessment of Risk Prior to When a Child in Continuing Care Returns Home.

Risk is assessed when a child's return home is being contemplated, when the child remains in continuing care.

KKCFS Criteria:

When:

- circumstances have significantly changed for parent(s);
- it is safe;
- it is in the child's well being; and
- it is in the child's best interest to possibly be returned to his or her parents.

The Agency social worker will consult with the Agency supervisor. If supported by the Agency supervisor the social worker will request MCFD to assign a fully delegated social worker to re-assess risk to the child.

KKCFS Process:

The social worker decides to return a child home when there is reason to believe that:

- The safety and well being of the child will be safeguarded in the home;
- The circumstances that created the court order have changed; and
- The circumstances of the child have changed significantly.

The child protection social worker from MCFD undertakes a risk assessment and makes a risk reduction service plan with the child and family prior to making any decision about returning a child home.

The social worker sets goals that are specific, measurable, achievable, realistic, and time-limited. The goals complement the risk reduction plan and identify the person responsible for carrying out each goal.

The child will remain in the continuing custody of the Director, for a period of time after returning home. The social worker continues to monitor the safety and well being of the child. The social worker maintains guardianship responsibilities for the child as long as the continuing custody order is in place. The social worker reassesses the level of risk of the child when:

- Additional information is gathered about new family members in the home which indicates the possibility of additional risk factors;
- A new risk reduction service plan is developed by the MCFD child protection worker; and

- There are new factors or issues that could impact the safety of the child in the home environment.

In developing the return home plan for the child

- The worker and parents sign an agreement for check up to ensure the safety of the child;
- The worker establishes an after care plan with the child's family; and
- The social worker has access to the child.

Responsibility for day-to-day care of the child rests with the parent.

KKCFS Documentation:

- MCFD risk assessment
- MCFD risk reduction service plan
- Case notes (KKCFS - 001)

Level 13 Practice Standard 15: Returning a Child Home Contemplating Cancellation of a Custody Order

Risk is assessed when a child's return home and cancellation of the custody order are being contemplated.

KKCFS Criteria:

When:

- circumstances have significantly changed for parent(s);
- it is safe;
- it is in the child's well being; and
- it is in the child's best interest.

To possibly be returned to his or her parents the Agency social worker will consult with the Agency supervisor. If supported by the Agency supervisor the social worker will request MCFD to assign a fully delegated social worker to re-assess risk to the child.

KKCFS Process:

The social worker decides to give consideration to returning a child home, only when there is reason to believe that the safety and well being of the child will be safeguarded in the home that the circumstances that created the order have changed significantly.

The social worker arranged for a child protection social worker to undertake a risk assessment and makes a risk reduction plan for the child and family prior to making a decision about returning a child home.

Until the continuing custody order is cancelled the social worker maintains guardianship responsibility for the child

The social worker sets goals that are specific, measurable, achievable, realistic, and time-limited. The goals complement the risk reduction plan and identify the person responsible for carrying out each goal.

Within 6 months of the child's return home, the social worker seeks extended family input as well as input from significant community members deciding whether an application should be made to rescind the continuing custody order. The social worker consults with the supervisor as to the decision reached.

When the social worker is satisfied that the safety and well being of the child will be safeguarded in the home without the social worker's involvement, and the parents have met the agreed upon goals of the risk reduction plan, the social worker applies to have the continuing custody order rescinded.

When a continuing custody order is rescinded the social worker offers follow-up and support services to the parents and documents this offer in the file. It is recognized at this time supports are of a voluntary nature. If protection concerns arise reassessment of risk must occur by a fully delegated social worker.

KKCFS Documentation:

- MCFD Risk Assessment
- MCFD Risk Reduction Service Plan
- Case notes (KKCFS - 001)

Level 13 Practice Standard 16: Permanency Planning

Adoption is considered when it is in the best interests of the child, and the child's cultural identity is a priority in adoption planning.

KKCFS Criteria:

The ideal goal for all children is to be raised safely in the parent(s)' care, and if not possible in the care of a family member. This must be a plan that is in the child's best interest and in the child's well being. Where this is not possible KKCFS requires a child to be raised in a permanent setting that meets all of the needs of the child including cultural needs.

The Ktunaxa Kinbasket Nations are generally not supportive of adoptions as a means of permanency planning. Children do require permanent plans as part of an extended family and community.

KKCFS Process:

The social worker considers an adoption plan for the child when such a plan is in the child's best interest, and when an adoptive family:

- Is or is likely to become available;
- Is suitable to meet the child's unique needs; and
- Is able and willing to provide a permanent and nurturing family setting for the child.

The social worker consults with a social worker delegated by the Director of Adoption to clarify roles and responsibilities on a case-by-case basis.

The Agency social worker ensures that the planning related to the adoption of a child includes an explanation and exploration of custom adoption practices.

The agency social worker prepares the child for an adoption placement by:

- Informing and discussing with the child the child's birth family history, including the circumstances that brought the child into care;
- Informing and discussing with the child the child's cultural identity and values;
- Fully informing the child about adoption and its effects;
- Providing the child with opportunities to freely express his or her feelings about the adoption, to ask questions and to seek clarification of what he or she does not understand;
- Providing as much detail as the child needs and understands, given the child's age, developmental capabilities, and maturity in understanding the concept of adoption;

- Respecting the child's need to have a sense of control over his or her life by consulting the child and incorporating the child's views in the adoption plan to the fullest extent possible; and
- If the child understands, providing information to the child about the availability of Aboriginal support services and the ways of accessing them.

The Agency Social Worker, in association with the social worker delegated by the Director of Adoption:

- Is involved in choosing the approved home for the child;
- May recommend the degree of openness that will govern the adoption of the child;
- Provides written confirmation that there is no barriers to adoption for the Public Trustee, if the Public Trustee is guardian of the child's estate;
- Prepares a birth family medical and social history;
- Prepares a life book for the child; and
- Prepares a pre-adoption placement report for the prospective adopting parents.

The social worker informs both birth parents, if appropriate, about the adoption of the child by an Aboriginal or non-Aboriginal family.

The social worker makes available to the adoption worker a list of people who may visit or have contact with the child prior to adoption.

KKCFS Documentation:

- Life Book

Level 13 Practice Standard 17: Preparation for Independence

Children in care receive the support, skills and guidance required to achieve independence upon leaving care at the age of 19.

KKCFS Criteria:

As above

KKCFS Policy:

When a child is likely to be in care by a court order until they reach the age of 19 or become independent in some other way, the social worker attempts to ensure that the child has the skills necessary to be successfully independent.

The social worker addresses the development of life skills, which includes:

- Family and social relationships upon reaching independence;
- The ability of the child to take responsibility upon reaching independence;
- The child's emotional needs and level of development;
- The child's educational and vocational development;
- The child's opportunity to develop independent living skills, for example:
 - Banking;
 - Budgeting;
 - Housekeeping;
 - Laundry;
 - Cooking and nutritional menu planning;
 - Shopping;
 - Resume writing skills;
 - Job seeking and keeping skills;
 - Skill in identifying training needs and sources of training;
 - Applying for financial support if required (i.e. Income Assistance, Band Assistance, etc);
 - Scheduling and time management; and
 - Leisure activity planning.

Linkage with the bands' social development committees must be a part of the ongoing work of KKCFS.

When a young person has been in the continuing custody or guardianship of the Director, KKCFS ensures the child is notified he or she may be eligible for additional support for up to two years prior to his or her 24th birthday, in order to further his or her education. This is a discretionary service provided by MCFD. Referral is made to MCFD for these services.

The social worker ensures that the child is provided with the appropriate living items such as a bed, dresser, etc., when they leave care. Belongings gathered on behalf of the child/youth must go with the child/youth as he/she leaves care.

KKCFS Documentation:

- Closing Recording (KKCFS - 006)

Level 13 Practice Standard 18: Reportable Circumstances

The Executive Director/Program Director of the Agency and the Director of Child and Family Services are notified of reportable circumstances and grievous incidents.

KKCFS Criteria:

Refer to Level 12 Practice Standard 25 - Reportable Circumstances

KKCFS Process:

Refer to Level 12 Practice Standard 25

KKCFS Documentation:

Refer to Level 12 Practice Standard 25

Level 13 Practice Standard 19: Interviewing the Child About His or Her Care Experience.

When a child leaves a placement setting, if the child has the capability to understand and respond, the child is interviewed individually and his or her views are sought regarding:

- **The quality of care, service and support he or she received in the setting; and**
- **How to improve the quality of care, service and support children receive in the setting.**

The information obtained in the interview is documented in the child's file and when appropriate, shared with the resource social worker.

KKCFS Criteria:

Refer to Level 12 Practice Standard 34 - Interviewing the Child About His or Her Care Experience

KKCFS Process:

Refer to Level 12 Practice Standard 34

KKCFS Documentation:

Refer to Level 12 Practice Standard 34

Level 13 Practice Standard 20: Case Closure

A formal closure process is used to close the file when a continuing custody order terminates.

KKCFS Criteria:

When a child is no longer in care, consideration will be given to recognition of this event at a community level. If appropriate a celebration should be considered. Examples of this may occur when:

- A child turns 19 and is therefore is considered an adult;
- A child is able to return home due to improvement in parental circumstance; or
- Adoption or Permanency Plan is occurring.

KKCFS Process:

When case closure occurs as a result of a child reaching the age of 19, adoption, marriage, or having the continuing custody order cancelled, the social worker ensures:

- The child is given a valid British Columbia Identification Card, Indian Status Card, Birth Certificate, and Social Insurance Card,
- The child has secured a source of income (not funded by the agency) to start living independently (i.e. income assistance, band social assistance, etc, if required);
- The child is given assistance to apply for necessary medical coverage, status, health care card (health canada or provincial medical plan), social insurance number, birth certificate, as well as assistance with educational needs;
- The child has adequate personal care and clothing items;
- The child is made aware of any post care opportunities under the *Child, Family and Community Service Act*, and that the child knows how to apply for them;
- The child is provided his or her medical history information;
- The child is provided with important information about his or her time in care, and is told how to obtain further information; and
- The child has a sufficient number of people to contact in the community who are able to provide the child with support when the child leaves care.

For developmentally delayed children an examination of funding from Community Living Services (Ministry of Children and Family Development) must commence with consideration for financial support and community services (testing is required to determine if the client is mentally handicapped (IQ less than 70)).

KKCFS Documentation:

- Closing Recording (KKCFS - 006)

Level 13 Practice Standard 21: Recording

There is a recording on file to reflect the circumstances and admission of the child to care, which include, the activities associated with the plan of care, documentation of the child's legal status, and the decisions and processes for file transfer and closure.

Also refer to Level 12 Practice Standard 26 - Biographical Information and Family History

KKCFS Criteria:

Each Child in Care file will have an Opening, Review, and Closing or Transferring Summary. In addition to these summaries each child's file will have other key documentation identified in other standards such as a plan of care.

KKCFS Process:

The Social Worker undertakes to provide the following file recording:

- The opening recording;
- The date that the child is admitted to care;
- The child's Band and status number;
- The date that the first Plan of Care is completed;
- The Plan of Care including notes from reviews and any revisions made to the plan;
- Educational reports, psychological reports, risk assessments and/or other assessments;
- Identification of key family members (i.e. genogram, family history, pictures);
- The date the file was transferred or closed;
- Review recordings;
- Closing or transferring recording; and
- Picture(s) of the child.

As the time when services are initiated, the social worker records:

- Reason for service;
- Historical information, including biographical information about the child and a physical description;
- Family background information;
- A reference to the interim plan of care;
- Information about the current placement;
- The child's medical history and any necessary health care plan, correspondence and reports; and
- The emotional and physical circumstances of the child upon admission to care.

In addition the social worker keeps on file:

- Copies of the Report(s) to Court;
- Copies of any agreements relating to the child (i.e. Support Services Agreement);
- Consents to the release of information;
- Applications for legal orders;
- Certificates of service;
- Court orders;
- Any agreements which were negotiated with the parents regarding access; guardianship responsibilities, and maintenance;
- The opening summary;
- Case conference minutes;
- Tracking summaries;
- Review recordings;
- Reportable circumstances;
- Correspondence; and
- Resource/placement list.

When a social worker closes or transfers a file, the file recording includes:

- Clearly identified reasons for case closure, transfer, or discharge;
- A summary of pertinent information regarding the child and the social worker's involvement;
- All contacts with the child since the last review date;
- Health care information and health care plan;
- Changes or revisions to the plan of care;
- A summary of Agency's involvement with the child and family; and
- Recommendations for further service.

The social worker and Agency supervisor sign all significant file recordings such as:

- Opening, review, transfer, and closing recordings; and
- Plan of Care.

The social worker seeks supervisory consultation and sign off of any decision that may impact the child's safety, well being, or best interest.

Documentation:

Refer to other standards for specific documentation requirements and required forms.

Level 13 Practice Standard 21A: Computer Database

KKCFS Criteria:

KKCFS will use the MCFD database known as the Ministry Information System (MIS). This system will reflect all children in KKCFS' care with open Child in Care (CS) files. For each child in care, the necessary screens will be entered and updated on a regular basis and as changes occur for the child. These screens include but are not limited to:

- Contact Screen;
- Aboriginal Profile Screen;
- Admission Screen;
- Health and Behaviour Screen;
- Location Screen;
- Legal Screen; and
- Plan Screen.

These screens contain the information that is required in the referral documented for caregivers and service providers that can be printed from this Ministry Information System.

In addition to this MIS system there is the Community Information System, that allows for critical after hours information to be sent and received, and the Office Vision System that allow for the transmission of critical information such as the Critical Incident Report. KKCFS has adopted all of these systems into it's' procedures and practice.

Level 13 Practice Standard 22: Responsibilities to the Public Trustee

The social worker accesses the assistance of the Public Trustee to protect the legal and financial interests of the child, when the child is in continuing custody or becomes a ward per the Family Relations Act.

KKCFS Criteria:

As above:

KKCFS Process:

In cases where the Director of Child and Family Services is named as guardian of the child and Public Trustee is appointed as the guardian of the child's estate, the social worker is responsible as a delegate of the Director to:

- Provide information about the child's circumstances to the Public Trustee;
- Provide a copy of the Continuing Custody Order to the Public Trustee;
- Inform the child about the role of the Public Trustee;
- Assist the child to contact the Public Trustee;
- Work co-operatively with the Public Trustee;
- Notify the Public Trustee about events affecting the child's financial or legal interests including:
 - Death of the child's parent(s);
 - Injuries to the child as a result of care or other incidents (e.g. assaults, fights, medical malpractice);
 - Injuries suffered as a result of abuse or serious neglect which result in physical or psychological damage to the child;
 - Claims when the child is involved in a civil action; and
 - When a child becomes a ward per section 29 of the *Family Relations Act*;
- Notify the Public Trustee that the child has turned 18 for the purpose of preparing the child for financial independence;
- Notify the Public Trustee that the child has turned 19;
- Notify the Public Trustee that the child has married;
- Notify the Public Trustee that the court has cancelled a continuing custody order under section 54 of the *Child, Family and Community Service Act*; and
- Notify the Public Trustee about the reasons for a court order when the order is made under section 58 of the *Child, Family and Community Service Act*.

KKCFS Documentation:

- Public Trustee Notification Form (KKCFS - 245)